

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MR : G	59	5/2/00
O.I.P.E. CLASSIFIER	MJW	59	05-06-00
FORMALITY REVIEW	BT	60245	7-10-00
RESPONSE FORMALITY REVIEW		60245	8-17-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	Original
1	3/5/00
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
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42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	Original
51	✓
52	✓
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions
staple additional sheet here

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